



Video Transcript: Basic Counseling Skills Video Series #1 AD

Speaker 1 (00:00): Welcome to the video series Affirm, Share, Ask Cycles for Patient-Centered Communication and Counseling. Brought to you by the Reproductive Health National Training Center, RHNTC, and Envision Sexual and Reproductive Health. This series was developed and is presented by Patty Cason, MS, FNP, Family Nurse Practitioner, and Joely Pritzker, MS, FNP, Family Nurse Practitioner. Affirm or Acknowledge your client with empathy and validation.

Patty Cason (00:29): The following video focuses on the first A in an ASA cycle, which is Affirming or Acknowledging the client. We show two ways to do this: demonstrating empathy and validation.

Description Narrator (00:40): A provider and client speak in an exam room.

Provider 1 (00:43): So, you're here for testing today?

Client 1 (00:46): I'm sure it's fine because I trust him, but still, after what happened last year... I'm panicked because we didn't use a condom.

Provider 1 (00:58): I can see how worried you are. Let's go ahead and get that testing done today. We should have the results within three days, and sometimes the results can come back sooner. What other questions do you have about STIs or STI testing?

Description Narrator (01:15): The client and provider individually speak to the camera.

Client 1 (01:19): I felt heard and cared for when my nurse acknowledged that I was panicked. I'm really glad she didn't ignore or dismiss the way I was feeling.

Provider 1 (01:28): I used to think that I didn't have enough time during a visit to demonstrate the empathy that I felt when a client shared an emotion. Actually, a brief acknowledgment of a client's emotions or feelings can make a huge difference in our rapport and doesn't add any extra time to my visits.

Joely Pritzker (01:47): You can demonstrate genuine empathy without labeling someone's feelings by using nonspecific language. Some examples of this are:

Description Narrator (01:54): The provider demonstrates empathy in various tones of voice.

Provider 1 (01:58): It sounds like this is really concerning to you. That must have been hard to deal with. Wow [surprised]. Wow [empathetic]. Wow [excited].

Description Narrator (02:11): A new provider and client speak in the exam room.

Provider 2 (02:14): Do you think you might like to have more children at some point?

Client 2 (02:17): Mm no. I'm raising three kids on my own right now. It's pretty overwhelming.

Provider 2 (02:21): Wow. That's a lot.

Client 2 (02:25): [sigh]

Provider 2 (02:26): Given that, how important is it to you to prevent pregnancy?

Description Narrator (02:30): The client speaks to the camera.

Client 2 (02:33): My life is very hard right now. I felt supported when my provider clearly got it, and it helped me relax a bit and feel like I could maybe trust her.

Patty Cason (02:46): When a client expresses a feeling—worry, fear, happiness, frustration, anger, sadness—it's always appropriate to demonstrate empathy. It's not helpful, and in fact, it's counterproductive to label or name the particular emotion. We all have different names and labels for the emotions we feel, and you don't want to tell someone they seem angry when they would say they're annoyed. It's only important to convey that you get that they're feeling something negative, or that they're feeling something positive, and the strength of that feeling.

Description Narrator (03:20): A new provider and client speak in the exam room.

Provider 3 (03:23): Can you tell me something that's important to you about your birth control?

Client 3 (03:26): As long as it's something I don't have to remember to take every day.

Provider 3 (03:29): Mm-hmm [affirmative].

Client 3 (03:30): I'm a terrible pill taker.

Provider 3 (03:32): Most people find it really challenging to take a pill every single day. What else is important to you about your birth control?

Description Narrator (03:39): The client speaks to the camera.

Client 3 (03:41): It felt good to hear that most other people have a hard time remembering to take their pills too. I mean, nobody's perfect.

Patty Cason (03:50): Validation is a tool that you can use in any interaction. If demonstrating empathy, finding agreement, or pointing out a health-supporting behavior is not appropriate or relevant to the conversation, there will always be something to validate.

Description Narrator (04:04): A new provider and client speak in the exam room.

Provider 4 (04:06): I see in your chart your last pap test was about five years ago.

Client 4 (04:10): Mmm [affirmative]

Provider 4 (04:11): We have time today to do your screening if you'd like?

Client 4 (04:13): Oh, do I really need that? I figured I'm good since I only have one partner.

Provider 4 (04:20): I can totally see why you would think that. Yes, everyone your age does need to be screened every five years. Knowing that, is today a good day for you?

Description Narrator (04:29): The client and provider individually speak to the camera.

Client 4 (04:32): When my provider said that she could understand why I would think that I didn't need a pap; it helped me continue listening because I didn't feel judged or corrected. It allowed me to get the information I need to make an informed decision for myself. I'm not thrilled about getting a pelvic exam today, but I am very glad to know the facts.

Provider 4 (04:53): Validation is a tool I often use to acknowledge my client because it's so easy to find something to validate.

Joely Pritzker (05:00): Validation is a straightforward way to acknowledge your client. Key phrases you can use to validate are:

Description Narrator (05:06): The provider validates the client in several individual examples.

Provider 4 (05:10): I can totally see why you would think that. I hear that question a lot. I also find that confusing. Most people find that challenging. Many clients I see wonder about that too.

Speaker 1 (05:24): This has been a production of the Reproductive Health National Training Center, RHNTC, and Envision Sexual and Reproductive Health.